

Health Home Learning Collaborative

Logistics

- Mute your line
- Do not put us on hold
- We expect attendance and engagement
- Type questions in the chat as you think of them and we will address them at the end.

This training is a collaborative effort between the Managed Care Organizations and Iowa Medicaid Enterprise

Iowa Medicaid Enterprise

Pamela Lester

plester@dhs.state.ia.us

LeAnn Moskowitz

lmoskow@dhs.state.ia.us

Amerigroup

Sara Hackbart

sara.hackbart@amerigroup.com

David Klinkenborg

david.klinkenborg@amerigroup.com

Emma Badgley

emma.badgley@amerigroup.com

Iowa Total Care

Bill Ocker IHH

Bill.J.Ocker@IowaTotalCare.com

Tori Reicherts

Tori.Reicherts@IowaTotalCare.com

AGENDA

1. Introductions
2. QA QI.....Bill
3. Open Discussion.....All

Coming up:

Learning Objectives

- **Realize the difference between quality assurance (QA) and quality improvement (QI)**
- **Peer to peer examples of improvement work.**

QA AND QI: WHAT'S THE DIFFERENCE?

QA

Assess when intended quality is reached

Reactive – works on problems after they occur

Retrospective – policing, punitive

QI

Move system from current state to new state of performance

Proactive – works on processes before problems occur

Prospective and retrospective

QA AND QI, CONT.

QA

Lead by
management

One Point in Time

Attributes blame

QI

Lead by staff, self determined

Continuous Regulatory Aimed
at improvement-measuring
where you are now and how to
make things better

Avoids attributing blame

QUALITY ASSURANCE

The process of looking at how well a service is provided. The process may include formally reviewing the services furnished to a person or group of persons, identifying and correcting problems, and then checking to see if the problem was corrected.

QUALITY IMPROVEMENT

The performance of discovery, remediation and quality improvement activities in order to ascertain whether the waiver meets the assurances, correct shortcomings, and pursue opportunities for improvement. Quality improvement also is employed to address other areas of waiver performance.

**WE DON'T HAVE PROBLEMS,
WE JUST HAVE MORE WORK
TO DO.**

IMPROVEMENT — WHAT WAS/WHAT IS



IOWA Department of
HUMAN SERVICES

SELECTING YOUR IMPROVEMENT TEAM

Establish the improvement team

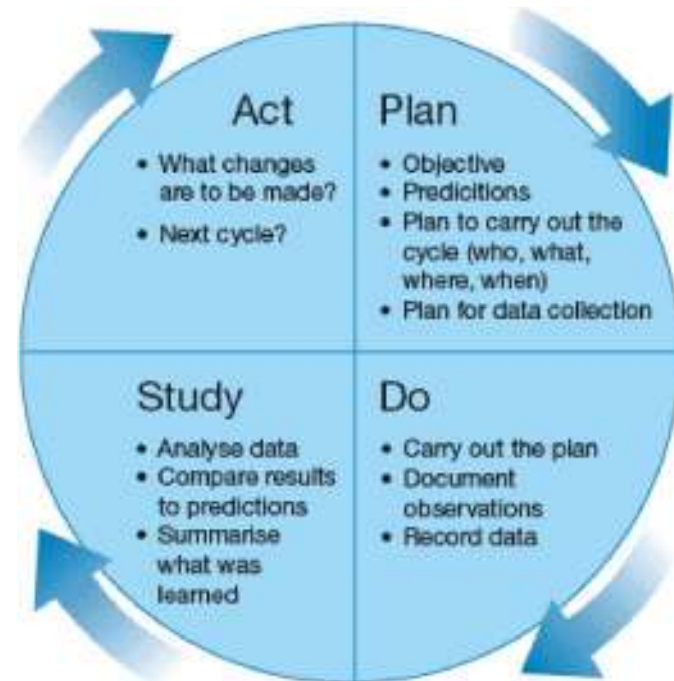
- **Consider roles that are involved in the process you are trying to improve.**
- **Ensure all pertinent roles are represented.**

IMPROVEMENT TOOLS: BRAINSTORMING

- **Get everyone in the game.**
- **No judgment!**
- **Vote on the first solution/intervention to test or work to build to consensus.**
- **This will be different for each IHH due to staffing and size.**

PDSA: THE CYCLE OF LEARNING AND IMPROVEMENT

- Design your PDSA cycle.
- Consider additional measures at this part of the process.
- What data will show leadership that you have made an improvement (or not)?



STANDARDIZE AND SUSTAIN/SPREAD

- **Communicate results.**
- **Assign a process owner.**
- **Continue to track data.**
- **Again this will look different**



SHARED QA / QI ACTIVITIES

Chart Review Workbook
Pay for Performance Measures
1:1 with HH to discuss Audit Results
Score Cards
Gaps in Care

HH QA / QI ACTIVITIES

Peer Audits

Team Lead Audits

1:1 with MCO

SPOTLIGHT

GERI DERNER

YSS

<https://www.hrsa.gov/sites/default/files/quality/toolbox/508pdfs/qualityimprovement.pdf>

Questions?

Open Discussion

Thank you!